STATE OF SOUTH DAKOTA

DEC 15 2016

Statement of Legal Newspaper Ownership and Circulation OF STATE Return to: Secretary of State 500 F. Capitol Pierre SD 57501-5077

1. TITLE OF NEWSPAPER	c. Capitol, Fierre, 3D 37	2. DATE
The Delmont Rocar	9	2. DATE 9-12-16
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS	HED ANNUALLY 31	B. ANNUAL SUBSCRIPTION
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF	P	RICE \$ 30, 00 \$ 35.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF	F PUBLICATION (Street,	City, County, State and ZIP+4 Code)
(Not printers) POBOX 129 Amax, SD S	2212	
5. COMPLETE MAILING ADDRÉSS OF THE HEADQUARTE	ERS OR GENERAL BUSI	NESS OFFICES OF THE
PUBLISHER (Not printers)		
PO Box 129 Armour, SD 573 6. FULL NAME OF PUBLISHER:	113 Doug	las county
6. FULL NAME OF PUBLISHER:	Icaye 015	
7. OWNER (If owned by a corporation, its name and address mus addresses of stockholders owning or holding 1 percent or more names and addresses of the individual owners must be given. If and address, as well as that of each individual must be given. FULL NAME	of total amount of stock. If owned by a partnership of	f not owned by a corporation, the
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M state. If more space is needed, list on back of this form. 9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIL EACH ISSUED PRECEDING	ES ACTUAL NO. COPIES
A TOTAL NO CODIES (Na Dana Bar Dia Dia Filata da Caria)	MONTHS	226
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	200	285
B.PAID AND/OR REQUESTED CIRCULATION1. Sales through dealers and carriers, street vendors, and counter sales.	35	35
Mail Subscription (Paid and or requested)	195	187
3. Paid Electronic Copies	0	0
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	230	222
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	12	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	242	222
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	37	3
2. Return from News Agents	\bigcirc	0
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	205	225
Statement must be signed by Publisher, Business Mana		
I swear that the statements made by me are true, c	correct, and complete	e:
Fik. Ohr	Pres. / V-las.	
(Signature)	(Title)	
State of South Dakota)	Sworn to before me this 21 day of Sept., 20 16	
- (cc §	Ar Kill	
County of Daylas) Notary Public		1 2 -
My commission expires: HUC - (0) 70		

Daughas County Publishing
P.O. Box 45
Corsica, SD 57328-0045
Daughas County

Gerri K. Olson Pres. /U. Pres.
P.O. Box 208
Lorsica, 50 57328

Eric E. Olson Sec. Treas.

P.O. Box 208

corsica, SD 57328